## 12-10-0

PTO/SB/05 (03-01)

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Approved for use through 10/31/2002. OMB 0651-0032 U.S Patent and Trademark Office, U.S. DEPARTMENT OF COMMERCE

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## UTILITY PATENT APPLICATION TRANSMITTAL

Attorney Docket No. LEE WILHELM First Inventor PAPER TISSUE HAVING ENHANCED SOFTHESS

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(Only for new nonprovisional applications under 37 CFR 1.53(b)) Assistant Commissioner for Patents APPLICATION ELEMENTS ADDRESS TO: Box Patent Application Washington, DC 20231 See MPEP chapter 600 concerning utility patent application contents. CD-ROM or CD-R in duplicate, large table or Fee Transmittal Form (e.g., PTO/SB/17) Computer Program (Appendix) (Submit an original and a duplicate for fee processing) Applicant claims small entity status. 8. Nucleotide and/or Amino Acid Sequence Submission See 37 CFR 1.27. (if applicable, all necessary) (preferred arrangement set forth below)

- Description 4th Computer Readable Form (CRF) Descriptive title of the invention Specification Sequence Listing on: Cross Reference to Related Applications CD-ROM or CD-R (2 copies); or - Statement Regarding Fed sponsored R & D - Reference to sequence listing, a table, ii. paper or a computer program listing appendix Statements verifying identity of above copies - Background of the Invention - Brief Summary of the Invention - Brief Description of the Drawings (if filed) ACCOMPANYING APPLICATION PARTS Assignment Papers (cover sheet & document(s)) - Detailed Description Power of - Claim(s) 37 CFR 3.73(b) Statement Power or Attorney - Abstract of the Disclosure (when there is an assignee) English Translation Document (if applicable) Drawing(s) (35 U.S.C. 113) [ Total Sheets Copies of IDS Information Disclosure Citations [ Total Pages Statement (IDS)/PTO-1449 5. Oath or Declaration Preliminary Amendment Newly executed (original or copy)
Copy from a prior application (37 CFR 1.63 (d))
(for continuation/divisional with Box 18 completed) Return Receipt Postcard (MPEP 503) (Should be specifically itemized) Certified Copy of Priority Document(s) (if foreign priority is claimed) **DELETION OF INVENTOR(S)** Signed statement attached deleting inventor(s) Nonpublication Request under 35 U.S.C. 122 named in the prior application, see 37 CFR (b)(2)(B)(i). Applicant must attach form PTO/SB/35 1 63(d)(2) and 1.33(b). or its equivalent. Application Data Sheet. See 37 CFR 1.76 18. If a CONTINUING APPLICATION, check appropriate box, and supply the requisite information below and in a preliminary amendment, or in an Application Qata Sheet under 37 CFR 1.76: Continuation Divisional Continuation, in-part (CIP) of prior application No. M. Halpern Group Art Unit. Prior application information For CONTINUATION OR DIVISIONAL APPS only: The entire disclosure of the prior application, from which an oath or declaration is supplied under Box 5b, is considered a part of the disclosure of the accompanying continuation or divisional application and is hereby incorporated by reference. The incorporation can only be relied upon when a portion has been inadvertently omitted from the submitted application parts. 19. CORRESPONDENCE ADDRESS Correspondence address below Customer Number or Bar Code Laber Name ATENT TRADEHARK OFFICE Address Zip Code State City Fax Telephone Country Registration No. (Attorney/Agent) Name (Print/Type) Signature

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FEE TRANSMITTAL			Complete if Known							
I LL INARORII I AL			Application Number							
for FY 2002			Filing Date				.5.2 (17	= 1 1 1		
Patent fees are subject to annual revision							NILHE	2401		
	Examiner Name									
Applicant claims small entity status. See 37 CFR 1.27	_	Group Art Unit					· -			
TOTAL AMOUNT OF PAYMENT (\$) 740.0	<u>O</u>	Attorr	attorney Docket No. 13729.1							
METHOD OF PAYMENT (check all that apply)		FEE CALCULATION (continued)								
Check Credit card Money Other None	3. ADDITIONAL FEES									
Deposit Account	Large	rge Entity Small Entity								
Donnell Tourist	Fee Cod	Fee e (\$)	Fee Code	Fee (\$)		Fee De	scription	1	Fee Paid	
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Name The Commissioner is authorized to: (check all that apply)	139 130 139			120	Non-English specification					
Charge fee(s) indicated below Credit any overpayments	139	2,520	147		_					
Charge any additional fee(s) during the pendency of this application						For filing a request for ex parte reexamination Requesting publication of SIR prior to				
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to the aboveidentified deposit account.	113				Requesting Examiner a	esting publication of SIR after iner action				
FEE CALCULATION	115	110	215	55	Extension t	Extension for reply within first month				
1. BASIC FILING FEE Large Entity   Small Entity	116	400	216	200			vithin secon			
Fee Fee Fee Fee Description	117	920		460			within third m			
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106 330 206 165 Design filing fee	128	1,960	228	980	Extension f	for reply v	within lifth m	onth		
107 510 207 255 Plant filing fee	119		1	160	Notice of A					
108 740 208 370 Reissue filing fee	120		220	160	_		ort of an ap	peal		
114 160 214 80 Provisional filing fee	121		i	140	Request for			oroceedina		
SUBTOTAL (1) (\$) 740,00	140	1,510	1,510 138 1,510 Petition to institute a public use proceeding  110 240 55 Petition to revive - unavoidable							
2. EXTRA CLAIM FEES FOR UTILITY AND REISSUE	4	1,280	241	640	Petition to	revive - u	ınintentional			
Fee from Extra Claims below Fee Paid		1,280	242	640	Utility issue	e fee (or r	eissue)			
Total Claims	143	460	243	230	Design issu	ue fee				
Independent 3** = X =	144	620	244	310	Plant issue					
Multiple Dependent	122	130	122	130	Petitions to					
	123		123	50	_	-	er 37 CFR 1			
Large Entity   Small Entity   Fee   Fee	126		126	180			mation Disc			
Code (\$)   Code (\$)   103 18   203 9   Claims in excess of 20	581	40	581	40	Recording property (ti	eacn pat imes nun	tent assignmenter of proper	erties)		
102 84 202 42 Independent claims in excess of 3	146	740	246	370	Filling a submission after final rejection (37 CFR § 1.129(a))					
104 280 204 140 Multiple dependent claim, if not paid 109 84 209 42 ** Reissue independent claims	149	740	249	370	For each a	additiona	, I invention to § 1.129(b))	o be		
over original patent	179	9 740	279	370		•	ued Examina			
110 18 210 9 ** Reissue claims in excess of 20 and over original patent	169		169	900	Request f	for exped	Ited examina			
SUBTOTAL (2) (\$)	Oth	er fee (:	specify	·)	of a desig					
**or number previously paid, if greater; For Reissues, see above	*Re	duced l	y Bas	ic Fllin	g Fee Paid	SI	JBTOTAL	(3) (\$)		
Complete (if applicable)										
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